



PART B - FEE(S) TRANSMITTAL

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25889 7590 10/01/2003

WILLIAM COLLARD
COLLARD & ROE, P.C.
1077 NORTHERN BOULEVARD
ROSLYN, NY 11576

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<i>William Collard</i>	(Applicant's Name)
<i>W. Collard</i>	(Signature)
12/23/03	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/980,343	11/30/2001	Gunter Martin	MARTIN, G. (PCT)	3124

TITLE OF INVENTION: SURFACE ACOUSTIC WAVE FILTER

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$0	\$1330	01/02/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
AGUIRRECHEA, JAYDI A	2834	310-31300B

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Collard & Roe, D.C.

2 _____
3 _____

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(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Tele Filter Zweigniederlassung der
Dover Germany GmbH

Teltow, Germany

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☐ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☐ Publication Fee☒ Advance Order - # of Copies

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☒ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card: Form PTO-2038 is attached.☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 052468 (enclose an extra copy of this form).

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(Date)

12/23/03

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